
By: **Delegates Murray, Carter, Dumais, Feldman, Haynes, Hurson, Kaiser,
King, Kirk, Lee, Madaleno, Marriott, Montgomery, Nathan-Pulliam,
Oaks, Paige, Simmons, Stern, Taylor, and Vaughn**

Introduced and read first time: January 22, 2004
Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Task Force on Men's Health**

3 FOR the purpose of establishing a Task Force on Men's Health; providing for the
4 composition and staffing of the Task Force; specifying the duties of the Task
5 Force; providing certain reimbursement for travel expenses; requiring the Task
6 Force to report its findings and recommendations on or before a certain date;
7 providing for the termination of this Act; and generally relating to a Task Force
8 on Men's Health.

9 Preamble

10 WHEREAS, There is a silent health crisis affecting the health and well-being of
11 Maryland men; and

12 WHEREAS, This health crisis is of particular concern to men but is also a
13 concern for women, as the crisis affects fathers, husbands, sons, and brothers; and

14 WHEREAS, Men's health is likewise a concern for employers, who lose
15 productive employees as well as pay the costs of medical care, and for State
16 government and society, which absorb the enormous costs of premature death and
17 disability, including the costs of caring for dependents left without income; and

18 WHEREAS, The life expectancy for a child born in Maryland in 2001 was 73.9
19 for males, versus 79.1 for females; and

20 WHEREAS, The 2001 Maryland death rate of 819.9 per 100,000 population for
21 men exceeded the death rate of 802.4 per 100,000 population for women; and

22 WHEREAS, In Maryland, only 22 percent of the deaths to women in 2001
23 occurred before age 65, men younger than 65 accounted for 36 percent of all deaths to
24 men in that year; and

25 WHEREAS, Men comprised 60 percent of new HIV cases in 2001 in Maryland
26 and 67 percent of new AIDS cases in the same year; and

1 WHEREAS, Men are reported to be 25 percent less likely than women to visit a
2 doctor; and

3 WHEREAS, Employment-based health insurance, which has traditionally
4 financed much of the health care received by men, is on the decline, and recent
5 Medicaid and other publicly-financed health care expansions have focused primarily
6 on children and women; and

7 WHEREAS, Regular exercise, good nutrition, healthy behaviors, regular
8 medical checkups, preventive health screenings, and diagnostic tests that detect
9 disease early have been proven to save lives; now, therefore,

10 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
11 MARYLAND, That:

12 (a) There is a Task Force on Men's Health.

13 (b) The Task Force consists of the following 13 members:

14 (1) two members of the Senate of Maryland, appointed by the President
15 of the Senate;

16 (2) two members of the House of Delegates, appointed by the Speaker of
17 the House;

18 (3) the following members, appointed by the Governor:

19 (i) two licensed physicians from the State's academic health
20 centers, who specialize in treating diseases of men;

21 (ii) one representative of the Department of Health and Mental
22 Hygiene;

23 (iii) two licensed mental health professionals;

24 (iv) one licensed nurse practitioner;

25 (v) two representatives of local health departments; and

26 (vi) one consumer member.

27 (c) The Governor shall designate the chairman of the Task Force.

28 (d) The Department of Health and Mental Hygiene shall provide staff support
29 for the Task Force.

30 (e) A member of the Task Force:

31 (1) may not receive compensation; but

1 (2) is entitled to reimbursement for expenses under the Standard State
2 Travel Regulations, as provided in the State budget.

3 (f) The Task Force shall:

4 (1) review health care morbidity and mortality statistics and utilization
5 patterns, including regional variations, for Maryland men;

6 (2) examine the availability and adequacy of health care services for
7 men;

8 (3) develop strategies and public policy recommendations, including
9 community outreach and public-private partnerships, that are designed to educate
10 Maryland men on the benefits of regular medical checkups, early detection and
11 preventive screening tests, and healthy lifestyle practices;

12 (4) focus on improving health outcomes of men in specific disease areas
13 including, but not limited to, prostate and testicular cancer, cardiovascular disease,
14 depression, and diabetes;

15 (5) develop strategies for preventive health care services that will result
16 in reduced health insurance rates; and

17 (6) recommend assistance, services, and policy changes that will result
18 in improvements to men's health care and health status.

19 (g) The Task Force shall report its findings and recommendations to the
20 Governor and, subject to § 2-1246 of the State Government Article, the General
21 Assembly on or before December 31, 2005.

22 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take
23 effect July 1, 2004. It shall remain effective for a period of 1 year and 6 months and,
24 at the end of December 31, 2005, with no further action required by the General
25 Assembly, this Act shall be abrogated and of no further force and effect.